



**10750 Hammerly Blvd, Suite 110 • Houston, TX 77043**

Phone # 281-821-4200 | Fax # 281-821-4880 | Date \_\_\_\_\_

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Patient Name: \_\_\_\_\_

Diagnosis Code: \_\_\_\_\_

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Doctor's Phone & Fax: \_\_\_\_\_

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☐ **Functional Capacity Evaluation (FCE)**  
*Worker's Compensation, Department of Labor, Disability (self-pay)*

☐ **Impairment Rating (IR/MMI)**  
*Texas Workers Compensation 4th Edition, 5th Edition Department of Labor, 6th Edition (Postal, Homeland Security, FBI, etc.), Federal (Longshore and Defense-based), Other states on a case-by-case basis*

☐ **Functional Capacity Evaluation (FCE) with Impairment Rating (IR/MMI)**  
*Worker's Compensation and Department of Labor*

Follow Up Doctor's Appointment: \_\_\_\_\_

Doctor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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